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## **PATENT APPLICATION TRANSMITTAL**

Attome	y Docket No.	11-225	
First In		cation Identifier	HIGASHIYAMA
Title	NOISE-RE	SISTANT CIF	<b>RCUIT AND APPARATUS</b>

First In	ventor or Application Identifier	HIGASHIYAMA
Title	NOISE-RESISTANT CIR USING SAME	CUIT AND APPARATUS
Expres	s Mail Label No.	
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(Uniy to	r new n	onprovisional	applications unde	r 37 C.F.R.§ 1.	53(b))	Expr	ess Ma	ıı Labe	ei No.				1	
Se	e MPE		ICATION ELI		ion conte	nts.	AE	DRE	SS TO:	Mail St	op Pate	for Patents nt Application 22313-1450	U.S. PT 0725	
*NO FEE	Sp -De -Cr -Ba -Su -Bri -De -Cl: -Ab Dra ath or a. Dra - De -Cl: -S	ecification escriptive title coss Referen ackground of ummary of th ief Descriptic etailed Descr aims ostract of the awing(s) (35 Declaration X Newly e Copy fre (for conti	on of the Drawin	Total Pages on Applications applications ags eferred Embo  [Total Sheets Total Sheets all or copy) cation (37 C. with Box 16 co NVENTOR(S) it attached de in the prior it 1.63(d)(2) a	5 20  Section 20  F.R. § 1  mpleted  applicating 1.33(  ALL ENTITY  T), EXCEPT	ion, b).	b	6. Nucleotide and/or Amino Acid Sequence Submission  (if applicable, all necessary)  a. Computer Readable Copy  b. Paper Copy (identical to computer copy)  c. Statement verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  7. X Assignment Papers (cover sheet & document(s))  Assignee: DENSO CORPORATION  8. 37 C.F.R.§ 3.73(b) Statement (when there is an assignee)  9. English Translation Document (if applicable)  10. X Information Disclosure Statement (IDS)/PTO-1449  11. Preliminary Amendment  12. X Return Receipt Postcard (MPEP 503) (should be specifically itemized)  *Small Entity Statement filed in prior application, Status still proper and desired  14. X Certified Copy of Priority Document(s) (if foreign priority is claimed)						
Pri Fo un	16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:  Continuation  Divisional  Continuation-in-part (CIP)  of prior application No:  Prior application information:  Examiner  Group/Art Unit:  For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.													
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	Name	(Print/type)	DAVID G. P	osz ,					on No. (Atte	omey/Age		37,701		
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L				$\bigcirc$	ノト						Date	February 19, 2	2004	

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February 19, 2004

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		Complete if Known		
FEE TRANSMITTAL	Application Number			
	Filing Date	February 19, 2004 HIGASHIYAMA		
for FY 2004	First Named Inventor			
Effective 10/01/2003. Patent fees are subject to annual revision.	Examiner Name			
Applicant Claims small entity status. See 37 CFR 1.27	Art Unit			
TOTAL AMOUNT OF PAYMENT (c) 806	Attorney Docket No.	11-225		

TOTAL AMOUNT OF PAYMENT

Signature

(s) 896

METHOD OF PAYMENT (check all that appl	у)	FEE CAL					(continued)			
X Check Credit card Money Other		3. ADDITIONAL FEES Large Entity   Small Entity								
Deposit Account	Ī	ee Fee Code (\$)	e Fe	e F	Fee (\$)	Fee Description			Fee Paid	
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Number 30-11-7			-					L		
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Charge any additional fee(s) during the pendency of this a	pplication 1	1804 9	920*   18	804	920*	Requesting publication Examiner action				
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1. BASIC FILING FEE				252	210	Extension for reply wit				
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1002 340 2002 170 Design filing fee				402		Notice of Appeal		_		
1003 530 2003 265 Plant filing fee					165	Filing a brief in suppor	• •			
1004 770 2004 385 Reissue filing fee				403	145	Request for oral hearing	_			
1005 160 2005 80 Provisional filing fee					1,510	Petition to institute a p	•	eding		
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2. EXTRA CLAIM FEES FOR UTILITY AND F	REISSUE 1	1501 1,	,330   25	501	665	Utility issue fee (or reis	ssue)			
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Total Claims 13 -20**= 0 × 18 =	0 1	1503	640 25	503	320	Plant issue fee				
Independent Claims 4 - 3**= 1 × 86 =	86 1	1460	130 14	460	130	Petitions to the Comm	issioner			
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SUBTOTAL (2) (\$)	86	Other fee	(specify	·)						
** or number previously paid, if greater; For Reissues, se		Reduced b	by Basic F	sic Filing Fee Paid SUBTOTAL (3) (\$) 40						
SUBMITTED BY		Complete (if applicable)								
Name (Print/Type) DAVID G. POSZ			ration No. ey/Agent)		37,70	)1	Telephone	(703) 70	7-9110	

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